• • •	Effective December 8, 2004								(0/552408				
e2	CLAIMS AS FILED - PART I SMALL EN								Y	7 -	071	TER THAN	
ı				(Column 1)		(Column 2)				OR	SMA	SMALL ENTIT	
ł		NAL STAGE FE	ES				RAT	E	FEE		RATE	FE	
	ASIC FEE		SMAL	L ENT. = \$ 150	LARGE ENT. = \$:	300	BASIC FEE			OR	BASIC FEE	30	
ľ	EXAMINATION	CAMINATION FEE		PCT Article 33(1)- \$ 50 / \$ 100	All other situations \$ 100 / \$ 200	-	EXAM FE	EXAM FEE			EXAM, FEE		
Ş	SEARCH FEE		ALLoth	A = \$ 50 / \$ 100 her countries = 00 / \$ 400	All other situations \$ 250 / \$ 500		SEARCH FEE				SEARCH FE	17.	
F	EE FOR EXT	RA SPEC. PGS.		minus 100 =	/50 =	\exists	X \$ 125 =				X \$ 250	- /	
r	OTAL CHARG	EABLE CLAIMS	24	minus 20 =	. 4	7	X \$ 25 =			OR	X \$ 50 =	- 	
IN	DEPENDENT	CLAIMS	6	minus 3 = .	3		X \$ 100	=		OR	X \$ 200	914	
M	ULTIPLE DEP	ENDENT CLAIM	PRESENT				+ \$ 180	=	7,	OR	+ \$ 360 =	1000	
•	If the difference in column 1 is less than zero, enter "0" in column 2								<u> </u>)R	TOTAL	- 	
K	0.2.0	OTHER THAN SMALL ENTITY OR SMALL ENTITY											
NT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NÚMBE PREVIOUS PAID FO	R PRESENT SLY EXTRA		RATE	ADI TION FEI	IAL		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	127	Minus	2	<i>t</i> =]	X \$ 25 =	TT	0	٦,	X \$ 50 =	1/	
AME	Independent	10	Minus	1 C	2 =] [X \$ 100 =		OI	3	\$ 200 =	1/	
	FIRST PRE	SENTATION OF	MULTIPLE DE	TIPLE DEPENDENT CLAIM			+ \$ 180 =		OF	٠,	\$ 360 =	/	
	•••	··· - •• ·••	•			1	FEE		OF	TO	TAL ADDIT. FEE		
		(Column 1)		(Cokerna 2	!) (Column 3)								
		CLAMS REMAINING AFTER AMENDMENT		HIGHEST HUMBER PREVIOUSL PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONA FEE			RATE	ADDI- TIONAL FEE	
	Total	•	Minus	4.	=		X \$ 25 =		OR	×	\$ 50 =		
1	ndependent	•	Minus	***	=·	7	(\$ 100 =		OR	X	\$ 200 =		
	FIRST PRES	IRST PRESENTATION OF MULTIPLE DEPENDENT CL				Ţ	\$ 180 =		OR	+;	360 =		
						TO	TAL ADDIT. FEE		OR		ALADOIT. FEE		
					•			-	•				
	ne Highest Nun	nn 1 is less than the ober Previously Paid	FOR IN THIS SP	ACE is less than '	20°, enter "20".								
Th	re Trignest Nun e Tilghest Numi	ther Previously Paid per Previously Paid F	For IN THIS SP. For (Total or Inde	ACE is less than to ependent) is the hi	3°, enter "3". Ighest number found in	the ap	propriate box i	in column :	I .			. }	

FORM PTO-875 (Rev. 02/2005)

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